AND HUMAN SERVICES CARE FINANCING ADMINISTRATION	Revised 9/21/	FORM APPROVED OMB NO. 0938-0193
AND THANOING ADMINISTRATION	1. TRANSMITTAL NUMBER:	2. STATE:
ANSMITTAL AND NOTICE OF APPROVAL OF	9 8 — 0 0 6:	'Wisconsin
STATE PLAN MATERIAL	3. PROGRAM IDENTIFICATION: T	
FOR: HEALTH CARE FINANCING ADMINISTRATION	SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	1/1/98	
5. TYPE OF PLAN MATERIAL (Check One):		
☐ NEW STATE PLAN ☐ AMENDMENT TO BE CO	NSIDERED AS NEW PLAN	AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMEN	DMENT (Separate Transmittal for each a	amendment)
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	•
42 CFR Part 440	a. FFY <u>1998</u> \$\$ \$\$	0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPER	
Supplement 1 to Attachment 3.1-A pages 8a. 8b. 8	OR ATTACHMENT (If Applicable)): Head. 3.14 pages 80,8
Supplement 1 to Attachment 3.1-A pages 8a, 8b, 8	Same 80, 15a and 15h	rttach 3.14 pages 80,8
Supplement 1 to Attachment 3.1-B pages 7a, 7b, 7	Such + 1 to attoch 3	. 1-B pages 70, 76, 70
	Supplement 1 to attach 3	,
10. SUBJECT OF AMENDMENT:		
	/	
School-Based Services Prescription Requirements		
11. GOVERNOR'S REVIEW (Check One):		
GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECIFIED:	
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	•	
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
	16. RETURN TO:	**************************************
Par promere for	Peggy L. Bartels, Directo	ır
13. TYPED NAME:	Bureau of Health Care Fin	
Peggy I. Bartels 14. TiTLE:	P.O. Box 309	
Director, Bureau of Health Care Financing	Madison, WI 53701	
15. DATE SUBMITTED:	2	
FOR REGIONAL OF	ICE USE ONLY	
	18. DATE APPROVED:	<u>A tratial exists in 1917</u> of Sevitalite 25 ball delivoir
PLAN APPROVED - O		
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OFFICE	u u
21. TYPED NAME:		
Walter V. Kummer	22. TITLE: Associate Regional A Division of Medicaid and S	Idministrator State Operations
23. REMARKS: State of the Control of the State of the Resident of the Residen	that to message per and otherwise gen	2000 - NameR - Codo S
		ee ded, u se you.
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Supplement 1 to Attachment 3.1-A Wisconsin

Eff. 1-1-98 School Based Services

Benefits and Limitations

Special rehabilitation services are evaluative, diagnostic and treatment services to correct any defects or conditions, or to teach compensatory skills for deficits that directly result from a medical condition. These services include obtaining, interpreting, and integrating evaluative, diagnostic and treatment information appropriate to an individual's coordinated plan of care. Special rehabilitative services may be provided under the provisions of the Individuals with Disabilities Education Act (IDEA), and are reimbursable only when included in and after implementation of an IEP (Individualized Education Plan) under IDEA. Treatment services

must meet all the standards of the Department of Public Instruction (DPI) and

Controls to prevent duplicative services and assure continuity of care are established by Medicaid where a child receives services from both Medicaid certified School Based Services (SBS) providers and Medicaid Health Maintenance Organizations (HMOs) or fee-for-service providers.

the Department of Regulation and Licensing (DRL) for prescriptions by a

For example, where a child enrolled in a Medicaid HMO receives SBS services. the HMO is responsible for providing and managing medical services. School based medical services are not included in Medicaid's capitated payment to HMOs. Effective with implementation of the new managed care contract, SBS and HMO providers will be required to sign joint memoranda of understanding (MOUs). An MOU is a legal document setting standards, policies and procedures to avoid duplication of services and coordinate care for the child. Where a child served by the Medicaid fee-for-service system receives SBS services, Medicaid requires SBS providers to document regular contacts between schools and community providers (such as physicians and therapists) as appropriate for each child but at least annually; and Medicaid will monitor service coordination and ensure duplicate services are not provided through prior authorization.

Special rehabilitation services include the following:

physician or other licensed health care provider.

Speech, Language and Hearing: These are remedial services recommended by a physician or other licensed practitioner of the healing arts within the scope of his or her practice under State law, and provided by licensed practitioners within the scope of practice as defined under State law in accordance with 42 CFR 440.60. The services are provided by or under the direction of a school audiologist licensed under s. PI 3.355, Wis. Adm. Code, or a school speech and language pathologist licensed under s. PI 3.35, Wis. Adm. Code, as authorized under ss. 115.28(7)(c), 115.76(5)(a)3. and (14) and 459.22(2)(f), Wis. Stats. The services are provided to children who need special education and related services due to hearing impairments or speech or language impairments, for maximum reduction of physical or mental disability and restoration of the children to their best possible functional level. Services include evaluations and reevaluations to determine an individual's need for these services; recommendations for a course of treatment; and the following services when identified in the IEP: treatment; and medical equipment for use in both the home and school settings, solely for the use of one child, under utilization controls established by Medicaid. The equipment is owned by the recipient.

TN # 98-006 Supersedes TN #95-029

nnroval Date	Effective	Date 1	-1-98

Page 8a

- 2. Occupational Therapy. These services are recommended by a physician and provided to a recipient by or under the direction of a licensed practitioner of the healing arts within the scope of his or her practice under State law, in accordance with 42 CFR 440.60. These services are performed by or under the direction of a school occupational therapist licensed by the department of public instruction under s. PI 3.36, Wis. Adm. Code. These services are provided to children who need occupational therapy services due to physical impairments, for maximum reduction of physical or mental disability and restoration of the children to their best possible functional level. These services are rehabilitative, active or restorative and are designed to correct or compensate for a medical problem interfering with age-appropriate functional performance. These services include evaluations and reevaluations of problems interfering with a person's functional performance; recommendations for a course of treatment; and the following services when identified in the IEP: treatment; and medical equipment for use in both the home and school settings. solely for the use of one child, under utilization controls established by Medicaid. The equipment is owned by the recipient.
- Physical Therapy. These services are recommended by a physician and provided to a recipient by or under the direction of a licensed practitioner of the healing arts within the scope of his or her practice under State law, in accordance with 42 CFR 440.60. These services are performed by or under the direction of a school physical therapist licensed by the department of public instruction under s. PI 3.37, Wis. Adm. Code. These services are provided to children who need physical therapy, due to physical impairments, for maximum reduction of physical disability and restoration of the children to their best possible functional level. These services are rehabilitative, active or restorative and are designed to correct or compensate for a medical problem. These services include evaluations and reevaluations to determine an individual's need for physical therapy; recommendations for a course of treatment; and the following services when identified in the IEP: treatment; and medical equipment for use in both the home and school settings, solely for the use of one child, under utilization controls established by Medicaid. The equipment is owned by the recipient.
- 4. Nursing. This service is performed by a Registered Nurse or licensed practical nurse, or is a delegated nursing act under nursing protocols. The services are prescribed or recommended by a physician or advance practice nurse with prescribing authority and are included in the IEP. The services are within the scope of professional practice of a Registered Nurse or licensed practical nurse, and includes but is not limited to: Screening and referral for health needs; medication management; explanation of treatments, therapies, and physical or mental conditions with family or other professional staff.

95-06 TN #95-029 Supersedes New 95-029.

Approval Date ____

Effective Date 7/1/95-1/1/981

- Psychological, Counseling and Social Work: These services 5. mean diagnostic services or active treatments with the intent to reasonably improve the individual's physical or mental condition. These services are performed by a licensed physician or psychiatrist, or licensed or certified school psychologist, school counselor, or school social work staff. These services include but are not limited to: testing and evaluation that apprise cognitive, emotional and social functioning and self concept; recommendations for a course of treatment; IEP case management; and therapy and treatment identified in an IEP that is planning, managing, and providing a program of psychological, counseling or social work services to individuals with a diagnosis or evaluation of psychological or behavioral problems, and unscheduled activities for the purpose of resolving an immediate crisis situation. Treatment services are included in an IEP.
- Developmental Testing, IDEA Assessment and Reassessment, and 6. Ongoing Monitoring and Coordination of IEP Services: These services are performed by Director's of Special Education and/or Pupil Services, and other certified school staff within the scope of their certification. Developmental testing means testing performed to determine if motor, speech, language, hearing, and psychological problems exist, or to detect the presence of any developmental lags. IDEA assessments and reassessments are medical assessments that are evaluations, tests, case management required to develop the IEP, and ongoing monitoring and coordination of IEP services and related activities performed to determine if an individual is eligible under the provisions of IDEA. These services occur regularly in the determination of eligibility under IDEA and are related to the evaluation of the functioning of the individual. These services are reimbursable only after they result in the implementation of an IEP.
- 7. Transportation: This service includes transportation to and from SBS provider sites for medically necessary services. This transportation includes only transportation for which the SBS provider is fiscally responsible, and includes, but is not limited to, ramp and lift vehicle and standard school bus transportation. This transportation may be provided by a SBS provider, or by a provider under contract to the SBS provider, to individuals who need transportation services. The covered services and transportation must be included in an IEP. This benefit is available for transportation to or from the medical service only on the same day that a covered Medical Assistance service is provided, other than transportation services.

Amended 7-1-97

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Sup	ersedes	;
TN	#97-010)

Approval Date

24. Any Other Medical Care

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a. <u>Transportation Services</u> Non-emergency transportation by air and water ambulance requires prior authorization. Ambulance service restrictions include, but are not limited to: medical order requirements for non-emergency services, trip purpose limitations, and pick-up and destination point limitations.

Specialized motor vehicle transportation services are provided only to recipients with prescriptions documenting their inability to use common carrier transportation (such as private auto, bus, taxi). Eligibility standards are established for second attendant services. Within Department-established restrictions, unloaded mileage is a covered service utilizing specified mileage zones. Trips over a specified upper mileage limit require prior authorization.

b. Transportation for School-Based Services (SBS):

1. Transportation to School.

A child's transportation to and from a school certified as an SBS provider is a covered service only if all of the following conditions are met:

- The child receives covered SBS services identified in the child's IEP at the school on the day the transportation is provided.
- The SBS provider is financially responsible for providing the transportation.
- The child's medical need for the particular type of transportation is identified in the IEP.
- The vehicle is equipped with and the child requires a ramp or lift, an aide is present and the child requires the aide's assistance in the vehicle or the child has behavioral problems that do not require the assistance of an aide but that preclude the child from riding on a standard school bus.

Effective 1-1-98

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Approval Date ____

Supplement 1 to Attachment 3.1-A State Wisconsin

- 2. Off-site transportation. A child's transportation to and from a site other than the child's "home" school is a covered service only if all of the following conditions are met:
 - The child receives covered SBS services identified in the child's IEP at the site on the day the transportation is provided.
 - The SBS provider is financially responsible for providing the transportation.
 - The transportation is either from the school to an offsite provider and back to school or to home, or is between home and a "special" school. A "special school" is a school that requires that a child have a disability in order to be enrolled, including but not limited to the Wisconsin School For The Deaf or the Wisconsin School For The Visually Handicapped, as defined in ch. PI 12, Wis. Adm. Code.

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Eff. School Based Services

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Controls to prevent duplicative services and assure continuity of care are established by Medicaid where a child receives services from both Medicaid certified School Based Services (SBS) providers and Medicaid Health Maintenance Organizations (HMOs) or fee-for-service providers.

For example, where a child enrolled in a Medicaid HMO receives SBS services, the HMO is responsible for providing and managing medical services. School based medical services are not included in Medicaid's capitated payment to HMOs. Effective with implementation of the new managed care contract, SBS and HMO providers will be required to sign joint memorandums of Understanding (MOUs) a legal document setting standards, policies and procedures to avoid duplication of services and coordinate care for the child. Where a child served by the Medicaid fee-for-service system receives SBS services, Medicaid requires SBS providers to document regular contacts between schools and community providers (such as physicians and therapists) as appropriate for each child but at least annually; and Medicaid will monitor service coordination and ensure duplicate services are not provided through prior authorization.

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Supplement 1 to Attachment 3.1-B
State Wisconsin

identified in the IEP: treatment; and medical equipment for use in both the home and school settings, solely for the use of one child, under utilization controls established by Medicaid. The equipment is owned by the recipient.

- Occupational Therapy. These services are recommended by a physician and provided to a recipient by or under the direction of a licensed practitioner of the healing arts within the scope of his or her practice under State law, in accordance with 42 CFR 440.60. These services are performed by or under the direction of a school occupational therapist licensed by the department of public instruction under s. PI 3.36, Wis. Adm. Code. These services are provided to children who need occupational therapy services due to physical impairments, for maximum reduction of physical or mental disability and restoration of the children to their best possible functional level. These services are rehabilitative. active or restorative and are designed to correct or compensate for a medical problem interfering with age-appropriate functional performance. These services include evaluations and reevaluations of problems interfering with a person's functional performance; recommendations for a course of treatment; and the following services when identified in the IEP: treatment; and medical equipment for use in both the home and school settings, solely for the use of one child, under utilization controls established by Medicaid. The equipment is owned by the recipient.
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Approval Date

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TN #98-006 Supersedes TN #95-029

Approval Date ___

Effective Date 1-1-98

Supplement 1 to Attachment 3.1-B
State _____Wisconsin

24. Any Other Medical Care

a. Transportation Services Non-emergency transportation by air and water ambulance requires prior authorization. Ambulance service restrictions include, but are not limited to: medical order requirements for non-emergency services, trip purpose limitations, and pick-up and destination point limitations.

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Supplement 1 to Attachment 3.1-8 State Wisconsin

- 2. Off-site transportation. A child's transportation to and from a site other than the child's "home" school is a covered service only if all of the following conditions are met:
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